


Neglect - ignore at their peril; supporting evidence-based assessments and interventions with children and families

Carla Thomas
Phil Heasman



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Workshop programme

- 1) Introduction
- 2) The scale and nature of neglect: the UK perspective; the 'state of the art'; issues and challenges
- 3) Understanding neglect: assessment and analysis
- 4) Responding to neglect: evidence-based interventions – providing hope for children and families

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Pathways to harm, pathways to protection: a triennial analysis of serious case reviews 2011 to 2014
May 2016
Peter Bunting, Maria Bracken, Sue Blyth, Peter Bunting, Jane Edwards, Dr Sarah-Jane Edwards, Andrea Kuper and Penny Rowman
University of Warwick

NSPCC
How safe are our children?
2017

The impacts of abuse and neglect on children: and comparison of different placement options
Evidence review
March 2017
Dr Julie Wilkinson
Dr Susannah Dwyer
Research in Practice

Putting children first
Delivering our vision for excellent children's social care
July 2016

No Good Options
Report of the Panel on Children, Young People and Families
November 2015
nca

Department for Education
Putting children first
Delivering our vision for excellent children's social care
July 2016

'The fundamental purpose of children's social care is to make sure that our most vulnerable children – those who have been abused and neglected, or face other significant challenges such as a disability – can have a safe, dependable foundation from which to grow and flourish.' (Ch.1, 3)

'Strengthening families is central... children who grow up with safe, stable and nurturing relationships form stronger friendships, develop greater resilience, achieve more in school and are more likely to build successful careers and have positive relationships throughout their lives.' (Ch.1, 2)

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Defining neglect

- Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, *likely to result* in the serious impairment of the child's health or development.
- Neglect may occur during pregnancy as a result of maternal substance abuse. Once a child is born, neglect may involve a parent or carer failing to:
 - provide adequate food, clothing and shelter (including exclusion from home or abandonment);
 - protect a child from physical and emotional harm or danger;
 - ensure adequate supervision (including the use of inadequate care-givers); or
 - ensure access to appropriate medical care or treatment.
- It may also include neglect of, or unresponsiveness to, a child's basic emotional needs.

*Working Together to Safeguard Children 2015
Department for Education England and Wales*

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Joint Targeted Area Inspection 2017-18

- Physical neglect
- Medical neglect
- Nutritional
- Educational
- Emotional
- Supervision and guidance

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Progress of the Child's Development in Long-Term Neglect Cases

© Child and Family Training 2014

WHO (2013) European Parliament (2014) Abuse, neglect and development

- Compared to other forms of violence studies, research studies on neglect have been limited, but analyses of worldwide research shows that **prevalence** is high – **16.3% for physical neglect** and **18.4% for emotional**.
 - In the European region an estimated **31 million** children are **affected by physical** and **35 million by emotional neglect**.

(This figure is applied to the regional population of children of 204 million)

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Children subject to Child Protection plans in the UK on 31st March 2016

Category	England	Wales	Northern Ireland	Scotland
No. of children	11 m	620,000	430,000	1m
Neglect	28,360	1,170	693	
Physical Abuse	6,200	385	691	
Sexual Abuse	2,970	170	135	
Emotional Abuse	22,420	1,020	170	
Multiple categories	3,350	195	443	
Total number on CP Plan	63,310	2,940	2,146	2,723

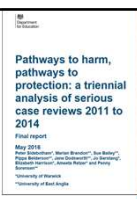
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Extreme neglect and deprivational abuse:
3% of all fatal Serious Case Review cases 2011 – 2014

- Four of these children died directly of the consequences of extreme neglect...
- In one case, extreme parental beliefs had led them to refuse appropriate medical care...
- In all of these cases:
 - multiple concerns over a period of time – particularly with evidence of poor growth
 - evidence that the family was isolated or the mother was particularly vulnerable – perhaps through:
 - teenage pregnancy
 - the impact of domestic abuse
 - The impact of mental health problems.

One mother had become: ‘...so overwhelmed with own problems and needs that she was incapable of adequately caring for herself let alone any dependent children.’ (p.58)

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**How safe are our children?
20 different indicators**

Indicator 14: Child protection plans and child protection registers

- Neglect remains the most common reason for being subject to a child protection plan or on a child protection register: 45%
- In England the proportion of children on a register due to neglect has remained fairly constant
 - emotional abuse – upward trend (doubling since 2002)
 - physical abuse and sexual abuse – downward trend

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A serious and pervasive form of maltreatment that occurs across childhood with potential long-term consequences across the life-span. (Sn. 2.5).

3.1 Neglect and abuse occur along spectrums of severity and the evidence suggests that the more chronic the experience, the more marked the symptoms of trauma in childhood and beyond. Impacts may be moderated by various factors including:

- the child’s age when neglect or abuse commences or occurs;
- the duration of the maltreatment;
- availability of protective factors such as sources of nurture and support;
- individual characteristics in a child’s temperament and genetic characteristics.

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A serious and pervasive form of maltreatment that occurs across childhood with potential long-term consequences across the life-span. (Sn. 2.5).



Identifying neglect and determining whether statutory thresholds for action have been reached can present real challenges (Sn.2.5):

- The chronic nature – professionals can become habituated to how a child is presenting and fail to question lack of developmental progress
- Neglect rarely produces a crisis that demands immediate, proactive and authoritative action – difficult to evidence
- Challenging to identify – the need to look beyond individual episodes, the importance of considering persistent and pervasive parenting behaviours which may be harmful or abusive
- Practitioners may be reluctant to make judgements about patterns of parental behaviour – especially if culturally embedded or associated with social disadvantages or if the parent is a victim also

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Identifying neglect and determining whether statutory thresholds for action have been reached can present real challenges (Sn.2.5):

The potential impact of neglect (Sn.3.2)

- ...will vary between individual children but evidence suggests that neglect is a particularly damaging form of maltreatment
- it can be difficult to disentangle specific effects from other forms of maltreatment
- for many children: significant implications for a range of developmental dimensions: health, education, identity, emotional and behavioural development, family and social relationships, social presentation and self-care skills
- neglected infants and toddlers can show a dramatic decline in overall developmental scores between the ages of 9 and 24 months and a progressive decline in cognitive functioning in the pre-school years

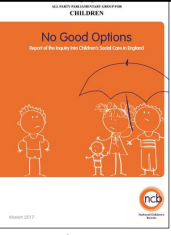
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- neglected infants who initially display secure attachment behaviours may increasingly develop insecure or disorganised attachment behaviours as they grow older
- children who have experienced neglect may experience increased vulnerability in adolescence compared to those who have been physically abused, potentially increasing the vulnerability of some young people to other types of maltreatment and/or victimisation, such as sexual exploitation
- in some cases, extreme neglect can be potentially life threatening.

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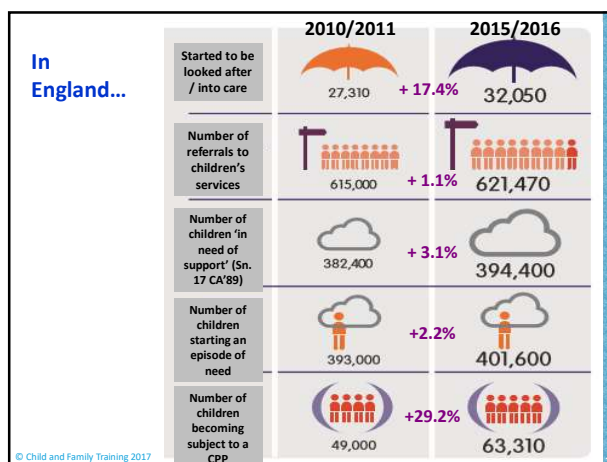
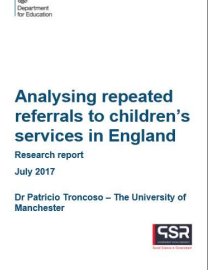
A system struggling...

- local authorities are too often failing to reach children and families who need help, whether through early intervention services, statutory support for 'children in need', or statutory support for children in care.
- increasing resource is being directed towards children who have already suffered abuse or neglect, or those at high risk of harm.

- fewer resources are allocated for early intervention and prevention, including support for families
- the result is a shift towards late intervention, where needs have often escalated significantly before any support is put in place. This often results in more children being taken into care, and ultimately in poorer outcomes for children and families.

(from the Executive Summary)

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It was found that that after 6 years, over half (55%) the children who were referred to Children's Services returned to the system at least once...

...an increased likelihood of re-referral is associated with:

- younger children
- females
- disabled children
- children initially stepped down as needing no further action
- children referred initially for abuse or neglect, parental disability or illness, family in acute distress, family dysfunction, socially unacceptable behaviour.

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Understanding Child Neglect
Bentovim et al 2010

- Problems sustaining improvements. Insidious decline of child's welfare
- Impaired parental empathy, often rooted in traumatic childhood experiences
- Longstanding developmental delay
- Historic educational problems – attendance, behaviour attainment etc.
- Attachment disorders
- Long-term disordered family organisation/routines
- Striking improvements in younger children moving to alternative care

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Some issues and challenges

- Definitions matter
- Significant harm – thresholds – presenting signs and symptoms
- 'Suffering or likely to suffer' – actual v potential
- Cumulative harm
- Evidence-based assessments
- Intervention – early - promoting sustainable change – preventing re-referrals

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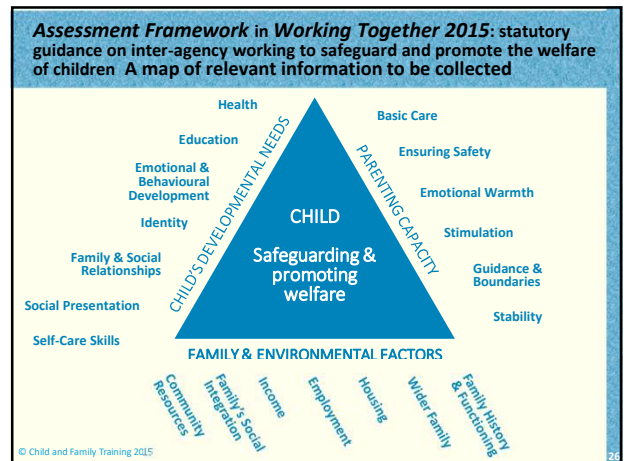
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Child and Family Training: seven stages

- 1) Consider the referral and the aims of the assessment
- 2) Gather information on the child's development, needs, parenting capacity, and family and environmental factors
- 3) Organise the information using the Assessment Framework and a chronology
- 4) Analyse the patterns of strengths and difficulties
- 5) Make judgements based on a systemic analysis

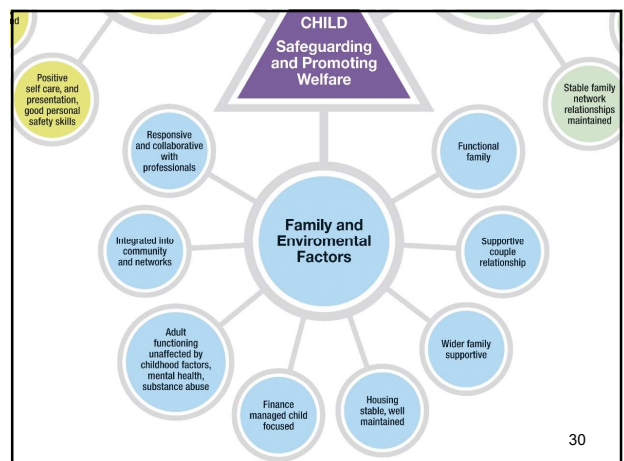
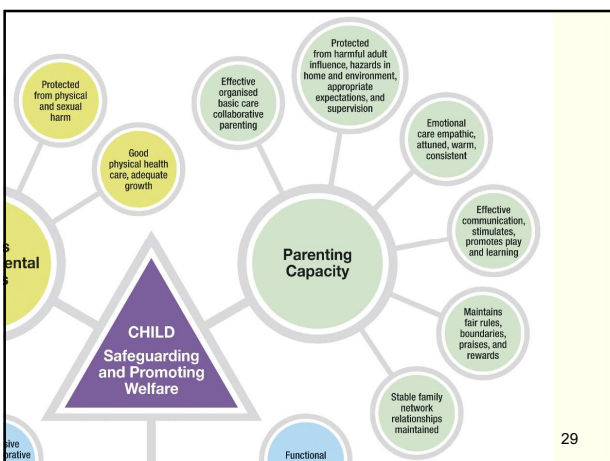
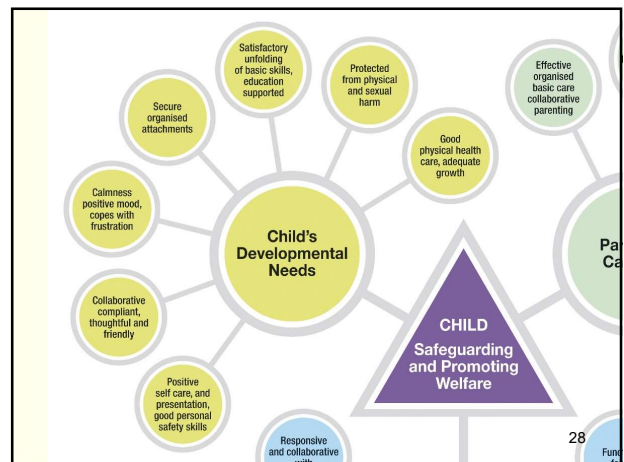
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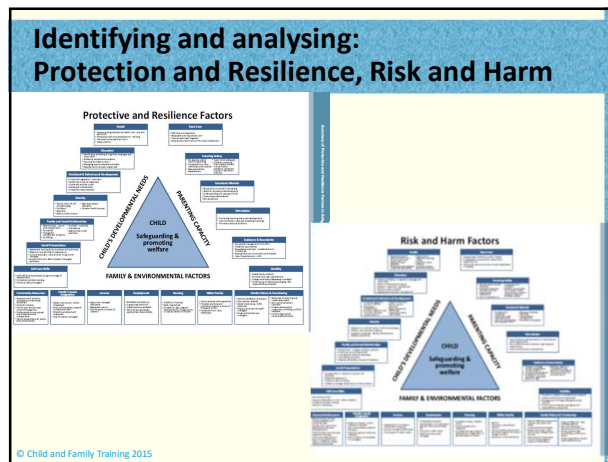
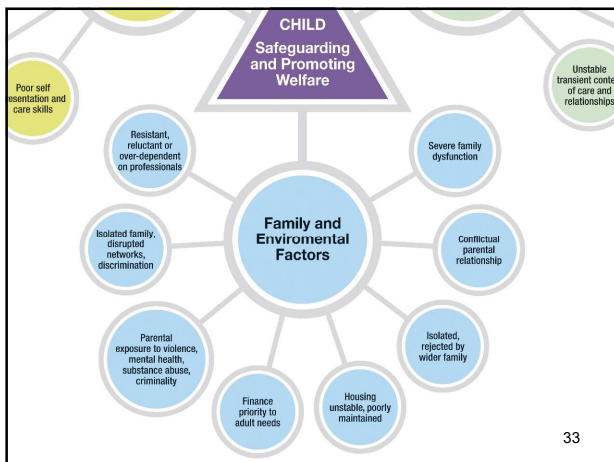
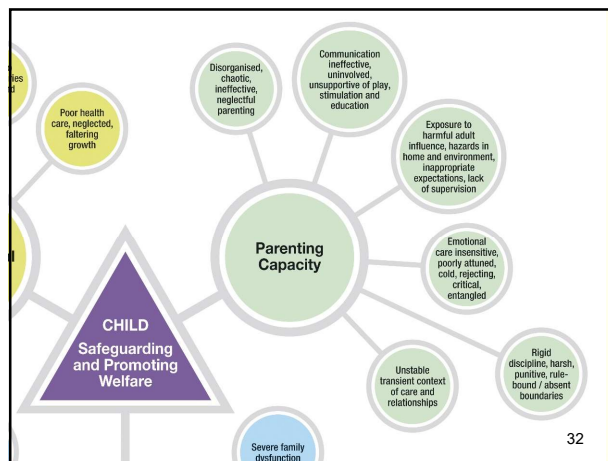
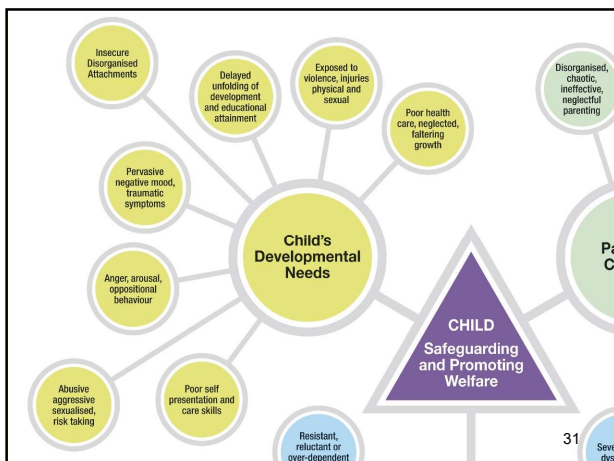


Elements of evidence based assessments

- Professional curiosity
- Professional courage
- Distinction between indicators and risk factors
- Language used by professionals:
 - With the family
 - With each other

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IMPACT: severity of difficulties and magnitude of strengths (1)

When considering severity/strengths of factors and processes, explore:

- **Intrusiveness (depth):** the more a factor intrudes upon others the greater the concern/ benefit.
- **Pervasiveness (breadth):** the greater the number aspects of child development, people, situations etc. on which the factor impacts, the greater the concern/benefit.

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IMPACT: severity of difficulties and magnitude of strengths (2)

- **Modifiability (change):** to what extent do other actions or experiences alter a factor/process.
- **Frequency (how often):** the more frequent a factor/process, the greater its impact.
- **Duration (length):** the longer duration of a factor/process, the greater the weight.
- **Unusualness:** the more unusual a factor/process the greater likelihood of it being severe.

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Training resources:
<http://childhoodneglect.childandfamilytraining.org.uk/index.html>

Childhood Neglect:
A resource for multi-agency training

HOME | CONTACT | **LEARN THE REASONS** | INTERVENTORY CARERS | FOOD ON THE TABLE | FOCUS ON PREVENTING | MANAGING NEGLECT

Childhood Neglect: A resource for multi-agency training

This resource has been developed to support trainers in delivering courses on safeguarding children and young people that focus on child neglect for multi-agency audiences. As part of a two-year project funded by the Department for Education (DfE), Child and Family Training has drawn on the wide range of materials commissioned and published online by the DfE, Childhood Neglect: Improving outcomes for children, to design 16 courses for trainers to use or adapt to the needs of particular audiences. In addressing the knowledge, skills and values required by practitioners and managers when working with children in neglect, much of the content is relevant not only to England but to other countries in the UK and beyond.

The importance of training on childhood neglect

The Guidance for Trainers accompanying the DfE materials draws attention to a number of key issues that make training on childhood neglect essential – for practitioners and those who have managerial responsibilities – principally:

- the prevalence of neglect
- and the gap between the known damage caused to children and young people as a result of neglect and

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Child and Family Training: seven stages

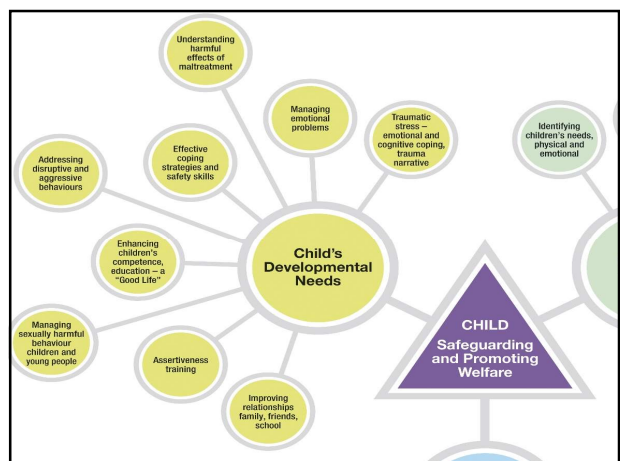
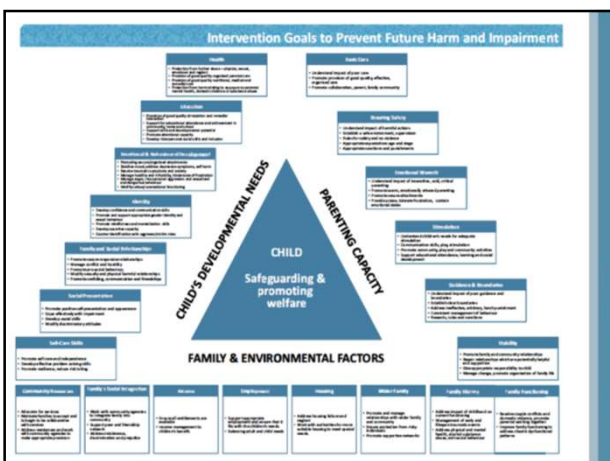
- 6) Make decisions and develop a plan of intervention
- 7) Implement the plan of intervention, monitor and review progress

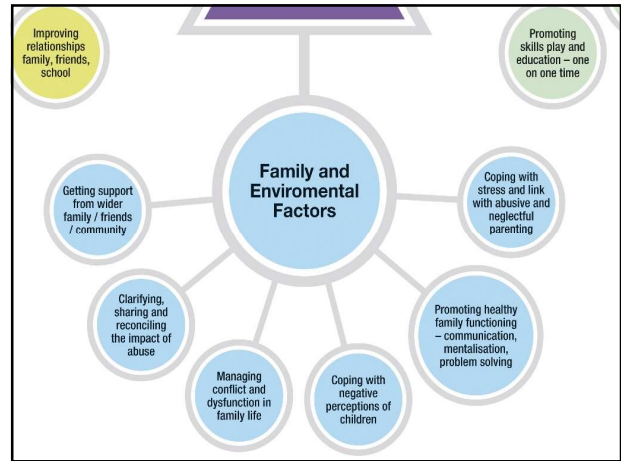
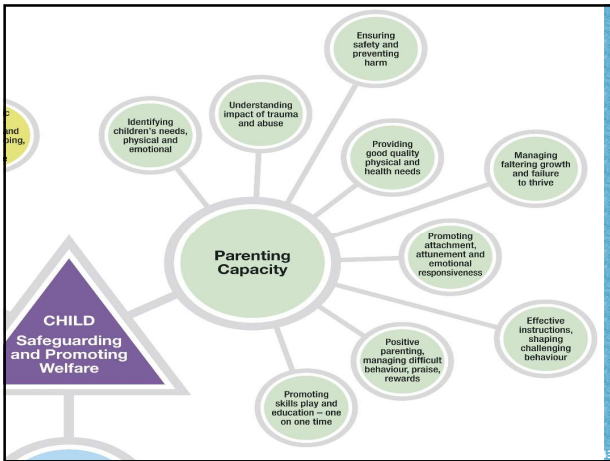
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Developing a detailed ‘HfC&F’ intervention plan /programme for a child / young person

Area of child / young person’s wellbeing or development to address	Anticipated / hoped for / required outcome (to be defined in relation to the child / young person’s wellbeing or development)	Intervention work (not the name of a service but activity / process) – with whom?	Resources to be used from the HfC&F intervention guides	By who/ by when	Specific measure of effectiveness

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Analysis of potential focus for intervention

- Use the 'intervention' diagrams to help you consider potential areas for intervention and work with a child, young person, parents, carers and family
 - Directly with children
 - Parents and carers: nature of care
 - Wider family, family functioning, and wider community

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Determine the prospects for successful intervention

To determine the prospects for successful intervention the following must be considered:

- Nature of harm suffered and the child or young person's wishes and feelings**
- Parental child-centredness**
 - the capacity of the parents to recognise, understand, acknowledge and take responsibility for difficulties
- Modifiability**
 - the parents level of motivation and capacity for change regarding the identified difficulties; and
 - whether the child's circumstances can be improved with safety within a reasonable period taking account of the child's developmental timeframe
- Parent's ability to co-operate with professionals and agencies**

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Poor prognosis for change (Bentovim et al 1987 and Bentovim et al 2009 p. 250)

- Child subject of serious abuse
- Failure to take responsibility
- Considerable family difficulties with few strengths
- Severe parental pathology, personality disorder or level of addiction which implies changes cannot be made in child's timeframe
- Resources unavailable to intervene given severity of situation
- Negative attitude to professionals

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Doubtful prognosis for achieving change (Bentovim et al 1987 and Bentovim et al 2009 p. 250)

- Uncertainty about whether change can be achieved or not within the time frame of the child
- Uncertainty about the degree of responsibility taken
- Uncertainty about the potential for collaborative work

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Characteristics where Intervention has been Unsuccessful (1) (Jones 1991, 1998)

- Continuing parental denial of abuse/impairment
- Parents who refuse/don't cooperate with help
- Severe personality problems
- Learning difficulties with accompanying mental illness
- Persistent parental substance/alcohol misuse
- Parental psychosis with delusions involving child

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Characteristics where Intervention has been Unsuccessful (2) (Jones 1991, 1998)

- Severe neglect and/or psychological abuse where parents display pervasive lack of empathy
- Severe sexual abuse involving penetration and of long duration
- Sadistic abuse or that which includes slow premeditated infliction of pain or suffering
- Mixed abuse cases
- Specific cases e.g. factitious/self induced injury, deliberate poisoning, scalding and burns

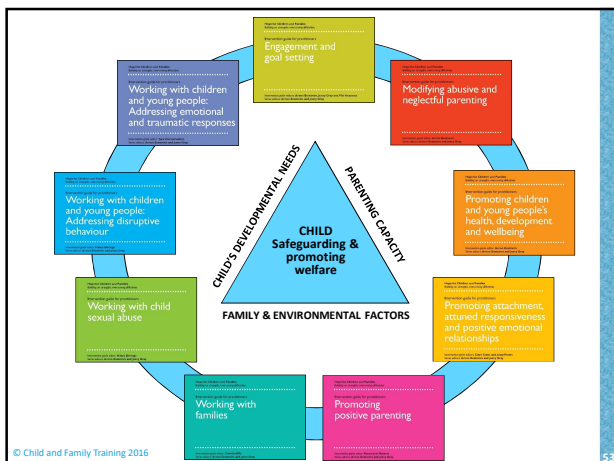
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Hopeful prognosis for change (Bentovim et al 1987, Bentovim et al 2009 p. 250)

- Good possibility of change within child's timeframe
- Reasonable degree of responsibility taken
- Reasonable flexibility of relationships
- Reasonable balance of family strengths and difficulties
- Potential for individual change with facilities and resources available
- Not too negative an attitude to professionals

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HfCF Intervention resource pack

- An empirically supported modular systemic intervention approach
- Prevents and addresses:
 - harmful parenting – abusive or neglectful
 - associated impairment of children and young people's health and development.

Hope for Children and Families: Targeting Abusive Parenting and the Associate Impairment of Children. A.Bentovim and I.Elliott. Journal of Clinical Child and Adolescent Psychology (Jan. 2014)

Hope for children and families: An evidence-based resource pack for frontline practitioners. A.Bentovim. Context (Feb.2014)

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What do the HfCF intervention guides include?

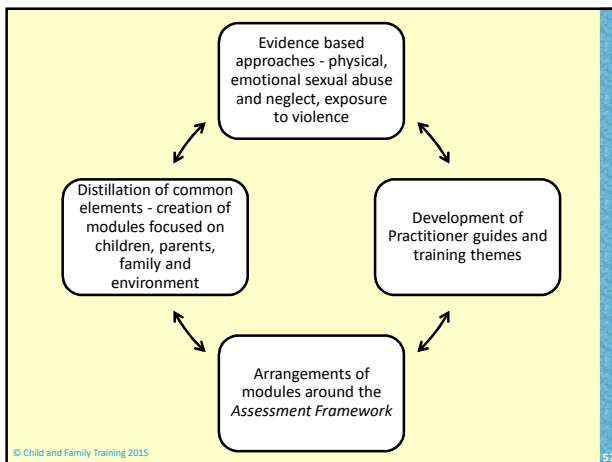
- Procedures drawn from the most successful evidence based forms of intervention to **prevent physical , emotional and sexual abuse, neglect, and exposure to violence**
- Addresses **anxiety, depression, trauma and/or conduct problems** associated with abuse and neglect
- Pays attention to the **personal and interpersonal components of intervention** – alliance, client motivation and practitioner factors
- Contributes to **establishing a sense of hopefulness**, a significant factor in recovery.

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Structure of the guides

- Practitioner briefings** – summarises, theory, research and the approach being followed
- Content and materials** by type – for parents, children, and practitioners – relevant steps
- Suggested scripts**
- Guidance notes** for practitioners to support direct work
- Activities**
- Practice/role plays** and coaching
- Handouts** and **worksheets**

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Intervention guide for practitioners

Hope for Children and Families
Building on strengths, overcoming difficulties

Intervention guide for practitioners

Promoting children and young people's health, development and wellbeing

Intervention guide editor: **Arnon Bentovim**
Series editors: **Arnon Bentovim and Jenny Gray**

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Promoting children and young people's health, development and wellbeing

Modules:

- Identifying physical and emotional needs
- Promoting development early and later
- Providing good quality basic care and attention to health needs
- Ensuring safety and protection in the home and community
- Nutritional care

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Intervention guide for practitioners

Hope for Children and Families
Building on strengths, overcoming difficulties

Intervention guide for practitioners

Promoting attachment, attuned responsiveness and positive emotional relationships

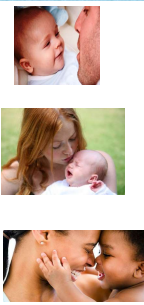
Intervention guide editors: **Clare Gates and Jenny Peters**
Series editors: **Arnon Bentovim and Jenny Gray**

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Promoting attachment, attuned responsiveness and positive emotional relationships

Modules:

- Promoting attachment, attuned responsiveness
- with younger children
- with older children – one on one time
- with adolescents, providing emotional support



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Intervention guide for practitioners

Hope for Children and Families
Building on strengths, overcoming difficulties

Intervention guide for practitioners

Promoting positive parenting


Intervention guide editor: Rosemarie Roberts
Series editors: Arnon Bentovim and Jenny Gray

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Promoting Positive parenting: Guidance and boundaries

Modules:

- Praise
- Attention and ignoring
- Giving effective instructions
- Rewards
- Shaping challenging behaviour
- Modifying disruptive behaviour



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Intervention guide for practitioners

Hope for Children and Families
Building on strengths, overcoming difficulties

Intervention guide for practitioners

Modifying abusive and neglectful parenting

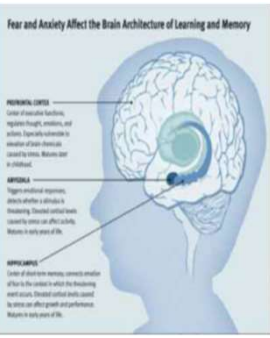
Intervention guide editor: Arnon Bentovim
Series editors: Arnon Bentovim and Jenny Gray

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Modifying abusive and neglectful parenting

Modules:

- Psycho-education - How abuse affects children's development, what helps
- Modifying parental stress - a key factor in abusive parenting
- Modifying negative perceptions
- Reconciling and clarifying the impact of abuse and neglect



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Intervention guide for practitioners

Hope for Children and Families
Building on strengths, overcoming difficulties

Intervention guide for practitioners

Working with children and young people: Addressing emotional and traumatic responses

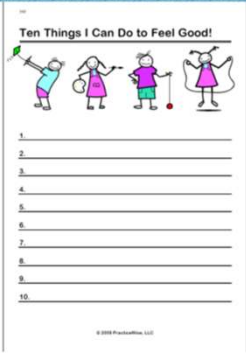
Intervention guide editor: Tara Weeramanthri
Series editors: Arnon Bentovim and Jenny Gray

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Working with children and young people: Addressing emotional and traumatic responses (1)

Modules:

- Developing a child-centred approach
- Psycho-education about the effects of maltreatment
- Safety Planning
- Coping Skills
- Relaxing and calming
- Describing and monitoring feelings
- Activity selection
- Problem solving

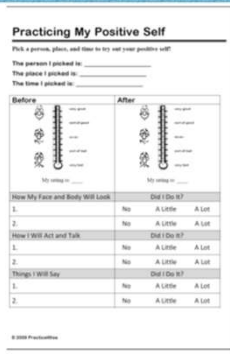


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Working with children and young people: Addressing emotional and traumatic responses (2)

Modules:

- Working with anxiety problems
- Mood problems
- Trauma problems
- Maintenance, building resilience
- Positive relationships with family and friends



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Intervention guide for practitioners

Hope for Children and Families
Building on strengths, overcoming difficulties

Intervention guide for practitioners

Working with children and young people: Addressing disruptive behaviour


Intervention guide editor: Hilary Eldridge
Series editors: Arnon Bentovim and Jenny Gray

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Working with children and young people: Addressing disruptive behaviour

Modules:

- Enhancing children's competence: 'the good life'
- Coping with disruptive behaviour
- Assertiveness training
- Positive relationships



Obstacles	How to overcome them
My aggressive behaviour	<ul style="list-style-type: none"> Learn how to manage my anger better Think about the consequences of my behaviour and how this will stop me reaching my goals for my 'New Life'
Being part of a gang	<ul style="list-style-type: none"> Join a football club Make friends outside of my gang (e.g. at school, at a football club) Improve my social skills Use my sense of humour to help me make new friends
Feeling angry	<ul style="list-style-type: none"> Talk in my sessions about why I feel angry and get some help on how to feel less angry about my past
Feeling confused	<ul style="list-style-type: none"> Talk in my sessions about what happened in my past that makes me feel confused Ask my team to help me understand more about my past

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Final discussion: beyond a UK perspective

- Consider the information presented in this workshop and its potential relevance *for your own context* especially services and practice that can respond effectively to children, young people and their families where there are concerns about neglect
- Insights, learning points, action points?
- 'The fundamental purpose of children's social care is to make sure that our most vulnerable children – those who have been abused and neglected, or face other significant challenges such as a disability – can have a safe, dependable foundation from which to grow and flourish.' (Putting Children First HM Gov't. July 2016 Ch.1, 3)

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Child and Family Training resources and courses to enhance effective responses to neglect

The Hope for Children and Families Programme:

- promoting children's health and development
- building on strengths
- overcoming difficulties
- using evidence-based approaches.

www.childandfamilytraining.org.uk

Thank you



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